



### SHIP Special Circumstance Enrollment

Student Name \_\_\_\_\_

Vandal ID # \_\_\_\_\_ Vandal Email \_\_\_\_\_@vandals.uidaho.edu

*For students who are normally not eligible for the Student Health Insurance Program (SHIP), but wish to enroll and qualify with one of the provisions below:*

- ☐ Student is in the final academic year of degree completion but enrolled in less than 12 undergraduate or 9 graduate credit hours. Student was covered by SHIP during the preceding semester.
- ☐ Student is concurrently enrolled at UI and another state of Idaho college/university for a total of 12 or more undergraduate or 9 or more graduate credits. Please provide UI class list and other college class list.
- ☐ Student is concurrently enrolled in a combination of 12 or more undergraduate or 9 or more graduate online and on-campus credits. *\*Additional documentation may be requested to verify eligibility.*
- ☐ Student is participating in a University of Idaho internship or study abroad program. Student was covered by SHIP in the preceding semester.
- ☐ Student is taking an approved leave of absence and has attached a copy of the approval letter from the Dean of Students. Student was covered by SHIP during the preceding semester. Student is only eligible to purchase SHIP for one academic semester under the leave of absence provision.
- ☐ OTHER: Attach supporting documentation from department, medical provider, or other approved sponsor. Please explain the reasoning below:

Student Signature \_\_\_\_\_ Date \_\_\_\_\_